VOID CHECK FORM			
TRANS CODE: 450			
EMPLOYEE NAME (FOR REFERENCE ONLY)			(1)
	COMPANY EMPLOYEE T	PAYMENT	PERIOD Y
	NUMBER D	CHECK NUMBER CHECK DATE	END DATE Q
	000		
EMPLOYEE NAME (FOR REFERENCE ONLY)			(1)
	COMPANY EMPLOYEE T	PAYMENT	PERIOD Y
	NUMBER NUMBER D	CHECK NUMBER CHECK DATE	END DATE Q
EMPLOYEE NAME (FOR REFERENCE ONLY)	SOUPLING TO SEE	DAVISTATION TO THE PROPERTY OF	PERIOD (1)
	COMPANY EMPLOYEE T NUMBER NUMBER D	PAYMENT  CHECK NUMBER CHECK DATE	PERIOD Y END DATE Q
			TITITI Q
EMPLOYEE NAME (FOR REFERENCE ONLY)			<u>(1)</u>
	COMPANY EMPLOYEE T	PAYMENT	PERIOD Y
	NUMBER   NUMBER   D	CHECK NUMBER CHECK DATE	END DATE Q
EMPLOYEE NAME (FOR REFERENCE ONLY)			(1)
,	COMPANY EMPLOYEE T	PAYMENT	PERIOD Y
	NUMBER NUMBER D	CHECK NUMBER CHECK DATE	END DATE Q
(1) YQ INDICATOR			
Y - YEAR TO DATE ONLY Q - YEAR AND QUARTER TO DATE			
C - YEAR AND PRIOR QUARTER			Form PR-2
<u>-</u>	AUTHORIZED SIGNATURE (AGENCY)	DATE KEYED BY (DOA)	DATE Rev 10/04